

Rhode Island Department of Labor & Training Division of Occupational Safety-Elevator Unit 1511 Pontiac Avenue, P.O. Box 20157 Cranston, RI 02920-0942 Phone: (401) 462-8570 Fax: (401) 462-8576

www.dlt.ri.gov/occusafe

NOTICE OF DECOMMISSION

Date:	_ State I.D.#:	State Account # (DLT use only)	
Location of Device	:		
Name of Building C Elevator Company	evator, Escalator, etc.) Owner: Performing Decor	: mmissioning of Device:	
Signature of Elevat	or Company Repr	esentative:	
Signature of Building Owner or Representative:			
	ADDITIC	ONAL INFORMATION	
Reviewed by:		Date:	